### Florida Department of State

Division of Corporations Public Access System 2004 APR -5 A 9: 35 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

AWY J. PATTERSON

Account Name : CNL FINANCIAL GROUP, INC.

Account Number : 113615003626 Phone : (407)650-1000 Fax Number : (407)650-1065

#### FOREIGN LIMITED LIABILITY COMPANY

CNL Retirement MOP 1411 Aurora CO GP, LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

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MILLION AND AND AND AND AND AND AND AND AND AN					
APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR MUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA					
SECRETARY OF STATE TALLAHASSEE FLORIDA					
IN COMPLIANCE WITH SECTION 608503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:					
1. CNL Retirement MOP 1411 Aurora CO GP, LLC					
(Name of foreign limited liability company)					
2 Delaware 3 Applied for					
(Jurisdiction under the law of which foreign limited liability FEI number, if applicable) company is organized)					
4. March 24, 2004 5. Perpetual					
(Date of Organization) (Duration: Year limited liability company will cease to exist or "perpetual")					
6. Upon qualification (Date first transacted business in Florida, (See sections 608.501, 608.502, and 817.155, F.S.)					
7. 450 S. Orange Avenue					
Orlando, FL 32801-3336					
(Street address of principal office)					
8. If limited liability company is a manager-managed company, check here					
9. The name and usual business addresses of the managing members or managers are as follows:					
Robert A. Bourne, 450 S. Orange Avenue, Orlando, FL 32801-3336					
Thomas J. Hutchison, III 450 S. Orange Avenue, Orlando, FL 32801-3336					
Bernard J. Angelo, 445 Broad Hollow Road, Melville, NY 11747					
3					
10. Attached is an original certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted.)					
11. Nature of business or purposes to be conducted or promoted in Florida: General Partner of					
CNL Retirement MOP 1411 Aurora CO, LP					
Signature of a member or an authorized representative of a member. (In accordance with section 608.408(1), F.S., the execution of this document constitutes an affirmation under the penelties of perjury that the facts justed herein are true.)					

Robert A. Bourne, Manager

Typed or printed name of signice

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# CERTIFICATE OF DESIGNATION OF SECRETARY OF STATE REGISTERED AGENT/REGISTERED OFFICETALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 508.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1 The name	of the Limited Liabil	itu Carmanu ic	•	
1. The name	Of the trumped tyron	nty Company is:	ì	
CNL Retire	ement MOP 1411 A	urora CO GP, LLC	l l	
2. The name	and the Florida stree	t address of the registered a	gent and office are:	
	Linda A. Scarc	elli	·	
		(Name)		<b>-</b> .
	450 S. Orange Avenue  Florida street address (P.O. Box NOT ACCEPTABLE)		į	
•			<b></b>	
	Orlando	FL 32801-3	336	
		(City/State/Zip)	1	•

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

ature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

FROM CORPORATION TRUST WILM TEAM #2

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SECRETARY OF STATE TALLAHASSEE, FLORID!

I, HARRIET SMITH WINDSOR, SECRETARY OF STATE OF THE STATE OF DELAWARE, DO HEREBY CERTIFY "CNL RETIREMENT MOP 1411 AURORA CO GP, LLC" IS DULY FORMED UNDER THE LAWS OF THE STATE OF DELIMARE and is in good standing and has a legal existence so far as the RECORDS OF THIS OFFICE SHOW, AS OF THE TWENTY-FOURTH DAY OF MARCH, A.D. 2004.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

Harriet Smith Windson, Secretary of State

AUTHENTICATION: 3010090

DATE: 03-24-04